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APPLICANTS

Cenk Acar, Irvine, CA;
 Andrei M. Shkel, Irvine, CA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY **
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CA	6	28	2
Verified and Acknowledged	/JOHN E CHAPMAN JR/ Examiner's Signature	Initials				

ADDRESS

MYERS DAWES ANDRAS & SHERMAN, LLP
 19900 MACARTHUR BLVD.,
 SUITE 1150
 IRVINE, CA 92612
 UNITED STATES

TITLE

NONRESONANT MICROMACHINED GYROSCOPES WITH STRUCTURAL MODE-DECOUPLING

FILING FEE RECEIVED 522	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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